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PTO/SB/21 (08-00)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/707,730
		Filing Date	November 6, 2000
		First Named Inventor	HILL, CRAIG
		Group Art Unit	1647
		Examiner Name	TURNER, SHARON
Total Number of Pages in This Submission	2	Attorney Docket Number	ASIL-002CIP
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard	
Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Signing Attorney/Agent (Reg. No.)	CAROL L. FRANCIS, 36.513 BOZICEVIC, FIELD & FRANCIS LLP		
Signature			
Date	February 13, 2003		

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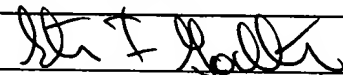
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	First Named Inventor	HILL, CRAIG	
	Application Number	09/707,730	
	Filing Date	November 6, 2000	
	Group Art Unit	1647	
	Examiner Name	TURNER, SHARON L.	
Title: "COMPOUNDS FOR INTRACELLULAR DELIVERY OF THERAPEUTIC MOIETIES TO NERVE CELLS"			

I hereby **revoke** all previous powers of attorney or authorizations of agent given in the above-identified application and **hereby appoint** Practitioners at:



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whose address is: Bozicevic, Field & Francis LLP, 200 Middlefield Road, Suite 200, Menlo Park, CA 94025 as its attorney(s) or agent(s) to prosecute the application identified above, to prepare and file amendments, to inspect and make copies thereof and of any papers in any appellate or *inter partes* proceedings in which the Application may be or become involved, and generally to conduct all business in the United States Patent and Trademark Office relating to the prosecution of the application or any application that claims priority from this application.



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STATEMENT UNDER 37 CFR § 3.73(b)

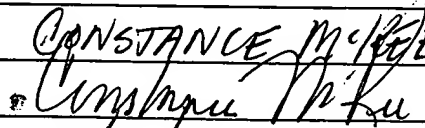
In accordance with 37 CFR §3.73(b) I hereby certify that I am empowered to act on behalf of the Assignee of the above-identified patent application. The Assignment was recorded with the U.S. Patent Office on July 16, 2002 at Reel 013085, Frames 0001 to 0016.

I declare that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code §1001 and that such willful false statements may jeopardize the validity of the above referenced application or any patent resulting from that application.

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- ☐ Applicant; or
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Signature	
Date	2/6/03